

## Kitchener Downtown Community Health Centre

### Type of Policy:

- |   |   |
|---|---|
| <input type="checkbox"/> Administration (A)               | <input checked="" type="checkbox"/> <b>Client Services General (CG)</b> |
| <input type="checkbox"/> Board of Directors (B)           | <input type="checkbox"/> Client Services Programs (CP)                  |
| <input type="checkbox"/> Financial (F)                    | <input type="checkbox"/> Primary Care (PC)                              |
| <input type="checkbox"/> Human Resources (H)              | <input type="checkbox"/> Acquired Brain Injury Program (ABI)            |
| <input type="checkbox"/> Information Systems (I)          | <input type="checkbox"/> Diabetes Education Program (DEP)               |
| <input type="checkbox"/> KDCHC Governing Principles (K)   |   |
| <input type="checkbox"/> Occupational Health & Safety (S) | <input type="checkbox"/> Volunteers (V)                                 |

**Policy No.: CG0402**

**Policy Title: Interpretation Services**

### Policy

1. KDCHC access to primary health care services includes having information and services provided in language that is understandable and meaningful to the people receiving the service.
2. Clients who receive services have a right to privacy in the care they are receiving – even from their own families;
3. Clients who are not able to communicate effectively in English will be identified. KDCHC will arrange to provide interpretation services for clients accessing primary care, allied health services, individual advocacy and support, the Diabetes Education Program and the Acquired Brain Injury program. In some situations, interpretation services may also be available for clients attending appointments with external service providers (eg. specialists) – either in person or on the telephone. The availability of these services will be limited by financial and operational considerations.
4. Interpretation services are governed by the KDCHC privacy and confidentiality policies.
5. Interpretation services that are used will be provided at no cost to the client.
6. Clients may be asked to use a family member or other informal interpretation resource when other resources are not available or in situations where the client's English capacity is increasing. As this capacity increases, interpreters may not be booked for routine appointments. This will be determined by the staff person providing service, in consultation with the client. The staff person providing service may recommend to the client that a family member act as an interpreter. Providers are responsible to communicate decisions regarding the scheduling of interpreters to KDCHC administrative staff.
7. KDCHC will pay interpreters according to the policy of the employing agency. Interpreters certified to provide interpretation but not connected to an agency will be compensated at a rate determined by KDCHC.

8. Staff from other community agencies will be asked, when available, to act as interpreters for clients on their caseload. They will not be compensated for interpretation services.
9. KDCHC will determine a yearly budget figure for these services. Budget limitations arising within a budget year may limit service that is available.

### **Procedures**

10. A list of trained interpreters will be maintained by administrative staff.
11. Clients or providers may request that an interpreter be scheduled for an appointment. Providers are responsible to determine when an interpreter is required for an appointment.
  - Primary Care providers will complete an Action Request form and have the client provide the form to Primary Health Administrative staff. Administrative staff will then be responsible for scheduling the requested interpreter.
  - Diabetes Education Program providers will communicate with Diabetes Administrative staff who will then schedule the interpreter.
  - All other staff will communicate with Primary Health Administrative who will then be responsible for scheduling the requested interpreter.
12. Scheduling of interpreters should be done 72 hours in advance if at all possible. In urgent situations, Administrative staff will attempt to find interpreters as soon as possible.
13. The Director of Primary Care and Director of Community Programs and Engagement, in consultation with staff, will make recommendations regarding limitations on interpreter services due to budget restrictions. The Executive Director will ultimately determine what funds are budgeted for each program or service area. Additional in year requests may be made to the Executive Director who will determine if additional funds are available.
14. Individual situations requiring interpretation services to access external community services will be determined in consultation with the appropriate Director, based on client need and KDCHC budgetary restrictions.
15. Issues of concern about services provided by an interpreter are to be brought to the attention of the appropriate Director for review and follow-up.
16. To ensure accuracy, all invoices for interpretation will be verified and reconciled by administrative staff prior to Finance staff for payment.

**Approved by:** Eric Goldberg, Executive Director

**Date:** October 3, 2016

---